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Bib Data Sheet

CONFIRMATION NO. 7965

SERIAL NUMBER 09/464,685	FILING DATE 12/16/1999 RULE	CLASS 435	GROUP ART UNIT 1635	ATTORNEY DOCKET NO. 5800-2B
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APPLICANTS

MARIA ALEXANDRA GLUCKSMANN, LEXINGTON, MA;
MARTIN R. HODGE, ARLINGTON, MA;
NADINE S. WEICH, BROOKLINE, MA;

** CONTINUING DATA *****
This application is a CIP of 09/324,465 06/02/1999
which is a CIP of 09/088,857 06/02/1998 ABN

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
** 02/03/2000

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MA	SHEETS DRAWING 7	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 3
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Verified and Acknowledged
Examiner's Signature _____ Initials _____

ADDRESS
INTELLECTUAL PROPERTY GROUP
MILLENNIUM PHARMACEUTICALS, INC
75 SIDNEY STREET
CAMBRIDGE, MA
02139

TITLE
2871 RECEPTOR, A NOVEL G-PROTEIN COUPLED RECEPTOR

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)



Bib Data Sheet


UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office

 Address: COMMISSIONER OF PATENTS AND TRADEMARKS
 Washington, D.C. 20231

SERIAL NUMBER 09/464,685	FILING DATE 12/16/1999 RULE -	CLASS 435	GROUP ART UNIT 1643	ATTORNEY DOCKET NO. 5800-2B
APPLICANTS MARIA ALEXANDRA GLUCKSMANN, LEXINGTON, MA ; MARTIN R. HODGE, ARLINGTON, MA ; NADINE S. WEICH, BROOKLINE, MA ;				
** CONTINUING DATA ***** THIS APPLICATION IS A CIP OF 09/324,465 06/02/1999 WHICH IS A CIP OF 09/088,857 06/02/1998				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** 02/03/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged		STATE OR COUNTRY MA	SHEETS DRAWING 7	TOTAL CLAIMS 26
ADDRESS 826		INDEPENDENT CLAIMS 3		
TITLE 2871 RECEPTOR, A NOVEL G-PROTEIN COUPLED RECEPTOR				
FILING FEE RECEIVED 998、	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	